

## APPLICATION DATA SHEET

### Application Information

Application Number::  
Filing Date::  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD Disks::  
Number of Copies of CDs::  
Sequence Submission?::  
Computer Readable Form (CRF)?:: No  
Number of Copies of CRF::  
Title:: PROTECTION OF AN ELECTRIC POWER  
TRANSMISSION NETWORK  
Attorney Docket Number:: 004501-748  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 3  
Total Drawing Sheets:: 2  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: German  
Status:: Full Capacity  
Given Name:: Christian  
Middle Name::  
Family Name:: REHTANZ  
Name Suffix::  
City of Residence:: Baden-Dättwil  
State or Province of Residence::  
Country of Residence:: Switzerland  
Street of Mailing Address:: Dättwilerstrasse 6  
City of Mailing Address:: Baden-Dättwil  
State or Province of Mailing Address::  
Country of Mailing Address:: Switzerland  
Postal or Zip Code of Mailing  
Address:: CH-5405  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: German  
Status:: Full Capacity  
Given Name:: Martin  
Middle Name::  
Family Name:: NAEDELE  
Name Suffix::  
City of Residence:: Zürich  
State or Province of Residence::  
Country of Residence:: Switzerland  
Street of Mailing Address:: Neunbrunnenstrasse 90  
City of Mailing Address:: Zürich

State or Province of Mailing Address::  
Country of Mailing Address:: Switzerland  
Postal or Zip Code of Mailing Address:: CH-8050  
Address::  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: German  
Status:: Full Capacity  
Given Name:: Joachim  
Middle Name::  
Family Name:: BERTSCH  
Name Suffix::  
City of Residence:: Kilchberg  
State or Province of Residence::  
Country of Residence:: Switzerland  
Street of Mailing Address:: Lindenstrasse 13  
City of Mailing Address:: Kilchberg  
State or Province of Mailing Address::  
Country of Mailing Address:: Switzerland  
Postal or Zip Code of Mailing Address:: CH-8802  
Address::

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620  
Fax Number:: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
Europe	02405935.4	11/01/02	Yes

**Assignee Information**

Assignee Name:: ABB Research Ltd  
Street of Mailing Address:: Affolternstrasse 52  
City of Mailing Address:: Zürich  
State or Province of Mailing Address::  
Country of Mailing Address:: Switzerland  
Postal or Zip Code of Mailing Address:: CH-8050